## PART B - FEE(S) TRANSMITTAL

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be complete

maintenance fee notification	ons.	nerwise in Block I, by (	a) specifying a new co	rrespondence address;	; and/or (b) indicating a sep	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)  24737 7590 09/08/2006				·ee(s) Iransmittal. I h	mailing can only be used for is certificate cannot be used a language, such as an assignment of mailing or transmission.	for any other accompanying
			ID A D DC	Cer	tificate of Mailing or Trans	mission
PHILIPS INTELLECTUAL PROPERTY & STANDARI P.O. BOX 3001 BRIARCLIFF MANOR, NY 10510				I hereby certify that this Fee(s) Transmittal is being deposited with the Un States Postal Service with sufficient postage for first class mail in an envel addressed to the Mail Stop ISSUE FEE address above, or being facsir transmitted to the USPTO (571) 273-2885, on the date indicated below.		
			[			(Depositor's name)
				(Signature)		
						(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	OR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/935,235 08/22/2001 TITLE OF INVENTION: METHOD OF CONTROLLING DEVICES V			Andreas Kellner		DE000126	8684
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DI			
nonprovisional	NO	\$1400	\$300	\$0	\$1700	12/08/2006
EXAMINER		ART UNIT	CLASS-SUBCLASS			
CHAWAN, VIJAY B 2626  1. Change of correspondence address or indication of "Fee Address" (3)			704-233000		•	······································
CFR 1.363).  Change of correspondent Change of C		,	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,			
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME ANI				• • •		
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)			
Koninklijke Philips Electronics N.V.			Eindhoven, The Netherlands			
Please check the appropriate	e assignee category or	categories (will not be pr	inted on the patent):	☐ Individual <b>★</b> Co	rporation or other private gro	oup entity Government
4a. The following fee(s) are	submitted:	41	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)			
Issue Fec			A check is enclosed.			
Publication Fee (No small entity discount permitted)  Advance Order - # of Copies			Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 12-1270 (enclose an extra copy of this form).			
5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.			b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).			
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Authorized Signature	//m		office.		/ /	
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				or retain a benefit by the estimated to take 12 nd dividual case. Any co icer, U.S. Patent and TO THIS ADDRESS	ne public which is to file (and ninutes to complete, includin mments on the amount of tir Trademark Office, U.S. Dept. SEND TO: Commissioner this plays a valid OMB control	